Organ donation in Europe: "Trust is fragile"

KLINKHAMMER, GISELA, http://www.aerzteblatt.de/archiv/148633/Organspende-in-Europa-vertrauen-ist-etwas-Zerbrechliches?src=search

The shortage in organ donations is not just a German problem. The European Commission in Brussels explains how efforts are being made at EU level to increase the number of transplants.

Organ shortage is not just a German, but rather a pan-European problem. This was made clear at an EU journalists' workshop in Brussels at the start of October. Around 63 800 patients in the EU are on a waiting list (as at 31 December 2012). By way of comparison: on 31 December 2011, this figure was 61 500. The number of patients who died while on the waiting list in 2012 is estimated at 3 780. The top donor countries are Spain, with 35.6, and Croatia with 34.8 donations for every million inhabitants. At the other end of the scale are Bulgaria (0.5), Romania (3.6) and Cyprus (5.5). Germany comes in the lower middle range, with 14.7 donations per million inhabitants (e-table).

Spain sets the example

The transplant scandal has even led to a further decrease. In 2012, the number of postmortem organ donors compared to the previous year according to details from the organ transplant foundation fell by 12.8% to 1 046.

Spain is exemplary in terms of transplant numbers. When the nephrologist Rafael Matesanz created the Spanish national transplant organisation in 1989 (*Organización Nacional de Trasplantes*, ONT), Spain had approximately the same donation rate as Germany today. According to Matesanz, this rate has more than doubled since that date, above all because public support and trust in the donor system in Spain is not the result of direct advertising campaigns but rather of ongoing active cooperation with the mass media. On the other hand, the head of the ONT fears that negative reporting, such as the reports on the manipulation of waiting lists in Germany, could ultimately cause a loss of trust throughout the EU.

Axel Rahmel, the Medical Director of *Eurotransplant* (ET), likewise fears a loss in trust as a result of the scandal which would be difficult to recover. Rahmel suspects that the manipulation in Germany, closely observed by other ET and EU countries, has caused major damage: "Trust is fragile. It is easy to destroy, easy to lose, but very difficult to regain." The consequence is a further increase in patient numbers on the waiting list. "At the end of the day, you have to pay for the loss in confidence", says Rahmel.

But what can be done to increase the number of transplants, while maintaining trust in organ donation? "Organ transplantation is special in that it is a highly technical medical field, and raises ethical and social problems such as determination of death", says Rahmel. However, the donation rate is also particularly affected by the legislation setting the framework in which the system develops.

EU action plans

The European Commission is trying on the one hand to increase the number of available organs and, on the other, to improve their quality. In early August 2012, amendments to the *Transplantationsgesetz* (Transplant Act) entered into force in Germany which were adopted in connection with the transposition of the EU Directive on the quality and safety of human organs. Alongside the Directive, the European Commission has been developing a number of action plans which were presented by Hélène Le Borgne, European Commission representative for organ donation and transplantation. In the "Accord" action (2012–2015), increased cooperation between intensive care wards and transplant coordinators is recommended. "One thing is clear," explains Belgian transplant coordinator Luc Colenbie: "No one goes to hospital as a donor. You are admitted as a patient. And doctors must first and foremost do everything they can to save their patients." Countries with particularly good experiences with transplant coordinators, such as Spain, could serve as an example for others.

E-table: numbers of donation and transplantation per country (2012 data)

Land	number of deceased do- nors*	deceased do- nation rates pmp	kidney Tx from decea- sed donors pmp	kidney tx from living donors pmp	Liver Tx pmp	Heart Tx pmp	lung Tx pmp
Östereich	198	23,5	42,7	7,5	14,9	7,3	14,7
Belgien	326	29,4	43,3	5,1	25,2	6,9	11,6
Bulgarien	9	1,2	0,3	1,2	0,5	0,3	-
Kroatien	153	34,8	50,5	2	29,1	10	-
Zypern	4	4,7	7	27,9	-	-	-
Tschechien	216	20,6	34,3	6,8	10,8	6,9	1.9
Dänemark	76	13,6	24,6	13,8	8,6	4,7	5,4
Estland	32	23,9	42,5	1,5	6,7	-	1,5
Finland	108	20	34,8	2	9,6	4,3	5
Frankreich	1 642	25,1	41,1	5,5	17,8	6,4	5,2
Deutschland	1 046	12,8	22,2	9,4	13,4	4,2	4,4
Griechenland	77	6,8	11,5	3,6	4,2	1,6	-
Ungarn	143	14,4	22,5	5,3	4,1	3,3	-
Irland	78	17	28,6	7	10,9	2,2	3,1
Italien	1 337	22	26,2	3,2	16,5	3,8	1,9
Lettland	38	18,6	31,9	2,5	-	0,5	-
Litauen	41	13,6	25,2	4	5	3	0,7
Luxemburg	4	7,7	_	_	-	_	-

Malta	12	28,6	19	2,4	-	-	-
Niederlande	256	15,3	28,5	29	8,7	2,2	4,8
Polen	352	9,1	28,4	1,3	8,5	2	0,4
Portugal	252	23,9	36,2	4,5	13,3	2,8	1,3
Rumänien	66	3,1	5,8	2,5	3,5	0,1	-
Slowakei	71	13,1	24,1	0,6	5,4	3,7	-
Slovenien	47	22,8	30,1	-	13,1	13,6	-
Spanien	1 643	35,6	47,4	7,8	23,5	5,3	5,2
Schweden	143	15,1	25,6	16,4	16,1	5	6,3
Großbritan- nien	1 164	18,4	29,5	16,3	12,9	2,2	2,9
Europäische Union	9 534	18,8	29,7	7,8	13,7	3,9	3,5
Island	3	9,4	-	18,8	-	-	-
Norwegen	117	23,4	43,7	16,2	20	6,4	5,6

Tx = transplants; All Transplant rates are indicated per million population (pmp).

*Number of actual deceased organ donors (after brain death and after circulatory death)

[2012 data: provisory data as the 2013 Transplant Newsletter (with 2012 data) was not yet published at

Highest rates are indicated in bold.